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USPTO FACSIMILE COVER SHEET

To: Commissioner for Patents
Fax Number: (571) 273-8300
Date: September 23, 2005
Pages: 12 pages (including this cover sheet)

MESSAGE:

TWO-STAGE VARIABLE-GAIN MIXER EMPLOYING SHUNT FEEDBACK
Application No. 10/039,247
Examiner Lewis G. West
Art Unit 2682

Amendment Transmittal
Amendment

(590.070)

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Amendment Transmittal

SEP 23 2005

Atty. Docket No. YOR9-2001-0342US1
(590.070)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Scott K. Reynolds
Serial No. : 10/039,247 Examiner : West, Lewis G.
Filed : January 4, 2002 Group Art Unit : 2682
For : TWO-STAGE VARIABLE-GAIN MIXER EMPLOYING SHUNT
FEEDBACK

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

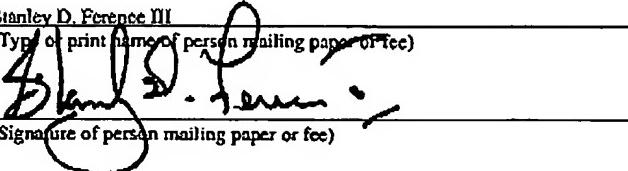
1. Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.

OR

2. In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. Small Entity status of this application has been established by a verified statement previously submitted.
4. A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR § 1.8(a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (571) 273-8300 on September 23, 2005, to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III
(Type or print name of person mailing paper or fee)

(Signature of person mailing paper or fee)

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5. Also enclosed: _____
6. No additional filing fee is required.
7. The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	<u>SMALL ENTITY</u>		<u>OTHER THAN A SMALL ENTITY</u>	
Total Claims	15	** 20	= *	x \$25	=	O x \$50	=
Ind. Claims	1	*** 3	= *	x \$100	=	O x \$200	=
<input checked="" type="checkbox"/> Multiple Dependent Claim Presented				+ \$180	=	O + \$360	=
				<u>TOTAL</u>	= \$	O <u>TOTAL</u>	= \$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

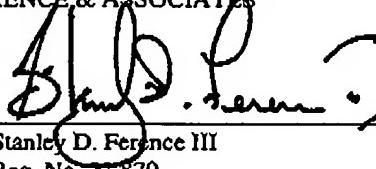
** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. Applicant encloses herewith a check for \$____ to cover the filing fee.
9. The Commissioner is hereby authorized to charge the \$____ filing fee to Deposit Account No. 50-0510.
10. The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES

By 
Stanley D. Ference III
Reg. No. 33,879

Dated: September 23, 2005

Mailing Address:

Customer No. 35195
FERENCE & ASSOCIATES
409 Broad Street
Pittsburgh, Pennsylvania 15143
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T-655 P004/012 F-813

Atty. Docket No. YOR9-2001-0342US1

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In re Application of : Scott K. Reynolds

Serial No. : 10/039,247 Examiner : West,
Lewis G.

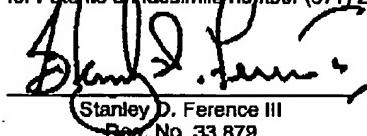
Filed : January 4, 2002 Art Unit : 2682

For : TWO-STAGE VARIABLE-GAIN MIXER
EMPLOYING SHUNT FEEDBACK

September 23, 2005

AMENDMENT

I hereby certify that this correspondence and any documents referred to as enclosed therewith are being transmitted by facsimile to the Commissioner for Patents on facsimile number (571) 273-8300 on September 23, 2005.


Stanley D. Ference III
Reg. No. 33,879

September 23, 2005
Date of Signature

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action dated June 29, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 6 of this paper.